UNITED STATES DISTRICT COURT DISTRICT OF OREGON

| | Ison, individually and on the situate of the situat | on <u>ed</u> Al | vil Case No. <u>3:1</u> PPLICATION FO DMISSION – <i>PR</i> | OR SPECL | AL | | |
|---|--|--------------------|--|--------------------|----------------|--|--|
| REI Energy, | LLC, a limited liability | company | | | | | |
| Defend | lant(s). | | | | | | |
| | _{ey} Stefan Coleman | re | equests special ac | lmission <i>pi</i> | ro hac vice in | | |
| the above-capti | oned case. | | | | | | |
| Certification of Attorney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the requirements of LR 83-3, and certify that the following information is correct: | | | | | | | |
| (1) | PERSONAL DATA: | | | | | | |
| | Name: Coleman | Stefan | | L | | | |
| | (Last Name) | (First Name) | 0. (0.1 | (MI) | (Suffix) | | |
| | Firm or Business Affiliation: Law Offices of Stefan Coleman, P.A. | | | | | | |
| | Mailing Address: | 1072 Madison Ave | e. Suite 1 | | | | |
| | City: Lakewood | State | New Jersey | _ Zip: 08 | 3701 | | |
| | Phone Number: (877) 3 | 333-9427 | Fax Number: | (888) 49 | 98-8946 | | |
| Business E-mail Address: law@stefancoleman.com | | | | | | | |
| | | | | | | | |

| (2) | BAF | R ADMISSIONS INFORMATION: | | | | |
|------|---|---|--|--|--|--|
| | (a) State bar admission(s), date(s) of admission, and bar ID number(s) See attachment | | | | | |
| | | | | | | |
| | (b) | Other federal court admission(s), date(s) of admission, and bar ID number(s): See attachment | | | | |
| (2) | | | | | | |
| (3) | CER | RTIFICATION OF DISCIPLINARY ACTIONS: | | | | |
| | (a) | ☑ I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or | | | | |
| | (b) | ☐ I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.) | | | | |
| (4) | CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: | | | | | |
| | Per LR 83-3(a)(3), I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings. | | | | | |
| (5) | REP | EPRESENTATION STATEMENT: | | | | |
| | I am representing the following party(s) in this case: Todd Nicholson, individually and on behalf of all others similarly situated. | | | | | |
| (6) | CM/ | ÆCF REGISTRATION: | | | | |
| | Concurrent with approval of this <i>pro hac vice</i> application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File sys (<i>See</i> the Court's website at <u>ord.uscourts.gov</u>), and I consent to electronic service puto Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon. | | | | | |
| DATE | E D this | 7th day of February, 2018 | | | | |
| | | Strjan Coloman (Signature of Pro Hac Counsel) | | | | |
| | | Stefan Coleman | | | | |
| | | (Typed Name) | | | | |

U.S. District Court–Oregon Revised April 27, 2017

| REQUIREMENT TO ASSOCIATE WITH I | LOCAL COUNSEL: | | | | | | |
|---|--------------------------------|-----------------------------|--|--|--|--|--|
| LR 83-3(a)(1) requires you to associate with locular LR 45-1. To associate with local counsel section. To request waiver of the requirement to following box. | l, obtain the signature of loc | al counsel in the following | | | | | |
| ☐ I seek admission for the limited purpose did not issue. Pursuant to LR 45-1(b), I associate with local counsel and therefor | I request waiver of the requ | irement of LR 83-3(a)(1) to | | | | | |
| CERTIFICATION OF ASSOCIATED LOC. | AL COUNSEL: | | | | | | |
| I certify that I am a member in good standing of requirements of LR 83-3, and that I will serve a | | | | | | | |
| DATED this 7th day of Febru | uary , 2018 151 KEV | IN CHAMES | | | | | |
| | (Signature of Local Cou | nsel) | | | | | |
| Name: Chames | Kevin | | | | | | |
| (Last Name) | (First Name) | (MI) (Suffix) | | | | | |
| Oregon State Bar Number: 870300 | | | | | | | |
| Firm or Business Affiliation: Kevin Chames Attorney at Law | | | | | | | |
| Mailing Address: 4150 N. Suttle Road | | | | | | | |
| City: Portland | State: Oregon | Zip: <u>97217</u> | | | | | |
| Phone Number: 503-939-3933 | Business E-mail Address | | | | | | |
| COI | URT ACTION | | | | | | |
| ☐ Application approve☐ Application denied. DATED this day of | | es. | | | | | |
| | Judge | | | | | | |

Attachment

State Court and District Court Admissions

State Court Admissions

Florida Supreme Court 10/9/2006 New Jersey State Court 6/1/2009 New York State Court 6/23/2009

District Court Admissions

Southern District of Florida 3/15/2010

Middle District of Florida 7/15/2009

Northern District of Florida 7/10/2009

Southern District of New York 7/24/2009

Northern District of New York 7/31/2009

Western District of New York 7/29/2009

New Jersey District Court 6/1/2009

Colorado District Court 7/2/2009

Central District of Illinois 7/30/2009

Northern District of Illinois 7/10/2009

Southern District of Illinois 7/29/2009

Northern District of Texas 8/17/2009

District Court of Nebraska 7/10/2009

Western District of Michigan 7/29/2009

Eastern District of Wisconsin 7/9/2009

Wisconsin Western District Court 6/16/2016